

FIG. 1

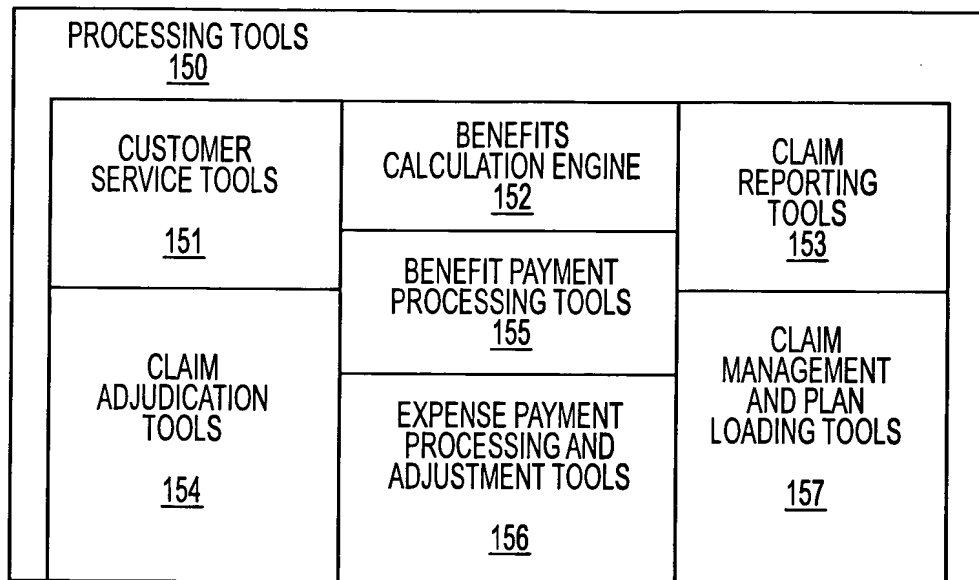


FIG. 2

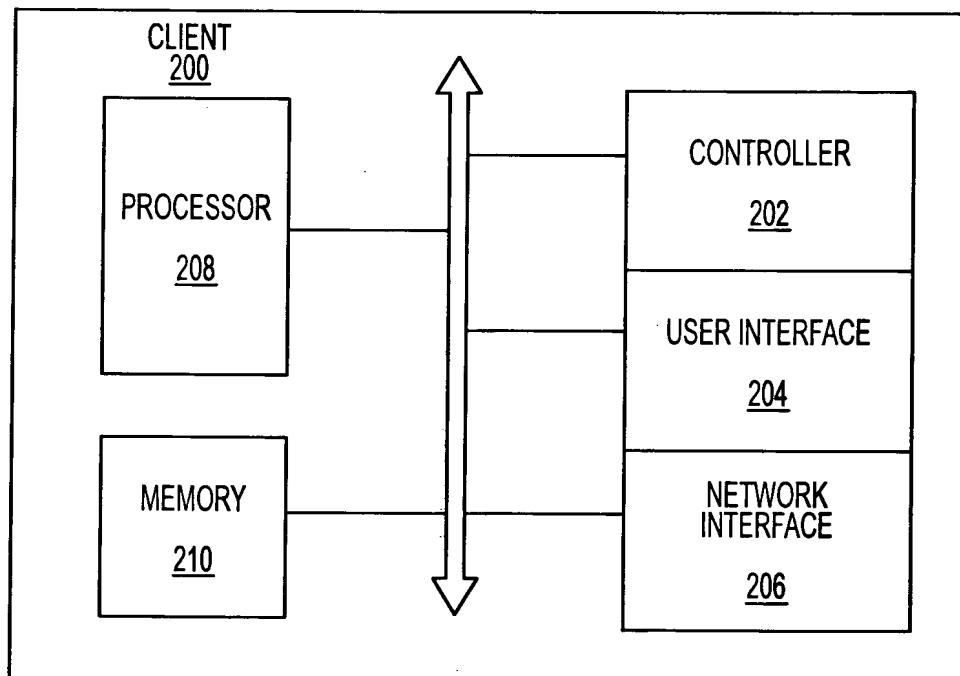


FIG. 3

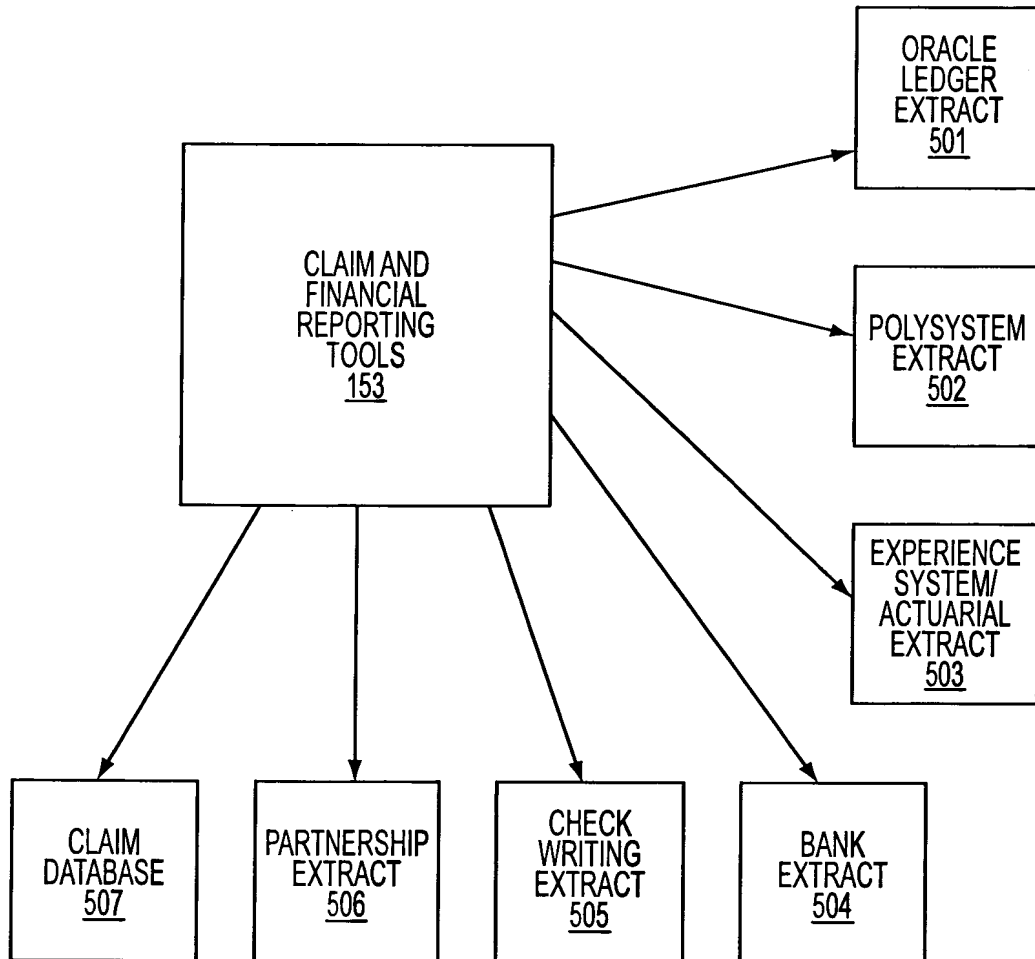


FIG. 4

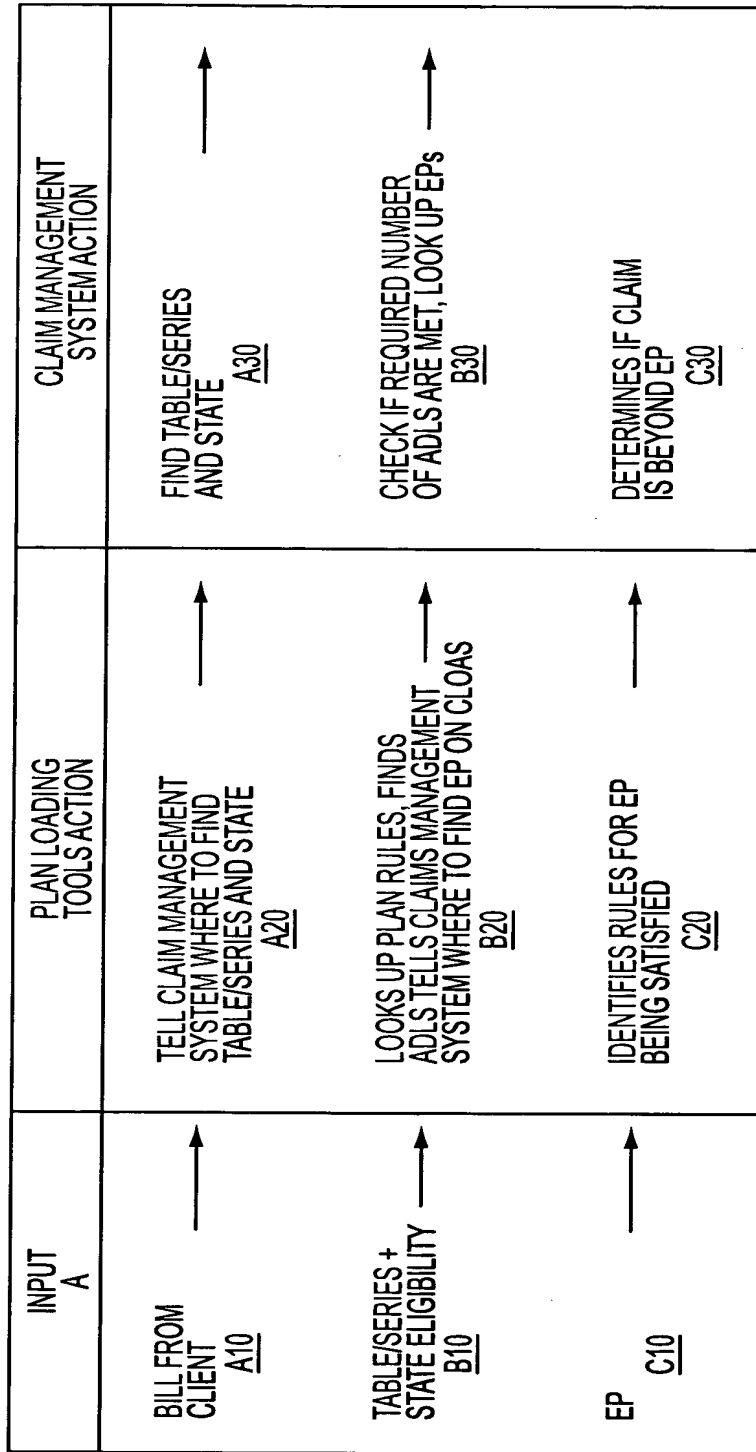


FIG. 5

INPUT	PLAN LOADING TOOLS ACTION	CLAIM MANAGEMENT SYSTEM ACTION
TABLE/SERIES AND STATE <u>A100</u>	LOOK UP COVERAGE FOR: REIMBURSEMENT, BIO, BENEFITS, NON-DUP/COORD. RULES <u>A110</u>	MATCH SERVICES WITH COVERED BENEFITS AND PLAN OF CARE, BENEFITS PAID BY MEDICARE <u>A120</u>
BENEFITS OK'd <u>B100</u>	FIND SPECIAL LIMITS AND %s TELLS SYSTEM WHERE TO FIND COVERAGE LIMITS <u>B110</u>	RETRIEVES COVERAGE LIMITS FROM CLOAS <u>B120</u>
LIMITS AND PERCENTAGES <u>C100</u>	SPECIFY RULES FOR USING LIMITS, PERCENTAGES <u>C110</u>	APPLY LIMITS AND %s TO COVERED BENEFITS <u>C120</u>
PAYABLE AMOUNT <u>D100</u>		DISPLAY AMOUNT <u>D110</u>

FIG. 6

Plan Load

Plans

Formulas

Steps

STEPS

- 3DAYHOSP 01/01/2000
- ABC 01/10/2000
- Primary
- PCT
- PWHEN
- EP
- MAX
- MAX
- MAX
- TOT
- Standard
- ACF50CA_C 01/01/2000
- ACF50CA_S 01/01/2000
- ACF60 01/01/2000
- ACF60_C 01/01/2000
- ACF60_S 01/01/2000
- ACF60CA 01/01/2000
- ACF60CA_C 01/01/2000
- ACF60CA_S 01/01/2000
- ACF7002 01/01/2000
- ACF7002_C 01/01/2000
- ACF7002_S 01/01/2000
- ACF80 01/01/2000
- ACF80_C 01/01/2000
- ACF80_S 01/01/2000
- ACF80CUSTOM 01/01/2000
- ACF80CUSTOM_C 01/01/2000
- ACF80CUSTOM_S 01/01/2000
- ACF80MN 01/01/2000
- ACF80MN_C 01/01/2000
- ACF80MN_S 01/01/2000
- ACFCA_C 01/01/2000
- ACFCA_S 01/01/2000
- ACFREIMB 01/01/2000
- ACFREIMB_C 01/01/2000
- ACFREIMB_S 01/01/2000
- ADC50000 01/01/2000

Formula ABC Begin Date 2000 End Date

Description Standard Testing

STEP

Section Primary Step Max Section Step Seq 4

MAXIMUM CALCULATION

Type Coverage 12 Unit Dollars 14 Per Service

LIMIT Policy

Original Benefit 18

COVERAGE.ORIGINAL_BENEFIT_AMT * COVERAGE.MAX_DAYS_PAYABLE 20

BIO Type None 22 BIO Compounding Period 24

BIO Interest 26 BIO Max Period 28 BIO Max Age 30

BIO on Remaining Balance

Add to Nursing Home Days

Claim Max Exceeded

Not counted in period Max

Save

Close

FIG. 7

10

Plan Load	STEPS	Formula	ABC	Begin Date	2000	End Date
Plans	3DAYHOSP 01/01/2000	ABC 01/10/2000				
Formulas	Primary					
Steps	PCT					
	PWHEH					
	EP					
	MAX					
	MAX					
	TOT					
	Standard					
	ACF50CA_C 01/01/2000					
	ACF50CA_S 01/01/2000					
	ACF60 01/01/2000					
	ACF60_C 01/01/2000					
	ACF60_S 01/01/2000					
	ACF60CA 01/01/2000					
	ACF60CA_C 01/01/2000					
	ACF60CA_S 01/01/2000					
	ACF7002 01/01/2000					
	ACF7002_C 01/01/2000					
	ACF7002_S 01/01/2000					
	ACF80 01/01/2000					
	ACF80_C 01/01/2000					
	ACF80_S 01/01/2000					
	ACF80CUSTOM 01/01/2000					
	ACF80CUSTOM_C 01/01/2000					
	ACF80CUSTOM_S 01/01/2000					
	ACF80MN 01/01/2000					
	ACF80MN_C 01/01/2000					
	ACF80MN_S 01/01/2000					
	ACFCA_C 01/01/2000					
	ACFCA_S 01/01/2000					
	ACFREIMB 01/01/2000					
	ACFREIMB_C 01/01/2000					
	ACFREIMB_S 01/01/2000					
	ADC50000 01/01/2000					

STEP	Section	Primary	Step	Max	Section Step Seq	4
Description Standard Testing						

Type	Coverage	12	Unit	Dollars	14	Per	Service
LIMIT							
Non-Multiplier		18					20
COVERAGE:ORIGINAL_BENEFIT_AMT * COVERAGE:MAX_DAYS_PAYABLE							

BIO Type	None	22	BIO Compounding Period	24
BIO Interest <td></td> <td>26<td>BIO Max Period<td>28</td></td></td>		26 <td>BIO Max Period<td>28</td></td>	BIO Max Period <td>28</td>	28
			BIO Max Age <td>30</td>	30

BIO on Remaining Balance	Add to Nursing Home Days	Claim Max Exceeded	Not counted in period
			Max

Save	Close

FIG. 8

10

STEPS		Formula		Begin Date		End Date	
3DAYHOSP 01/01/2000		ABC		2000			
ABC 01/10/2000		Standard Testing					
Primary		Section		Step		Section Step Seq	
PCT		Primary		Max		4	
PWHE							
EP							
MAX							
MAX							
TOT							
Standard							
ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000							
ACF60 01/01/2000							
ACF60_C 01/01/2000							
ACF60_S 01/01/2000							
ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000							
ACF7002 01/01/2000							
ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000							
ACF80 01/01/2000							
ACF80_C 01/01/2000							
ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000							
ACF80CUSTOM_C 01/01/2000							
ACF80CUSTOM_S 01/01/2000							
ACF80MN 01/01/2000							
ACF80MN_C 01/01/2000							
ACF80MN_S 01/01/2000							
ACFCA_C 01/01/2000							
ACFCA_S 01/01/2000							
ACFREIMB 01/01/2000							
ACFREIMB_C 01/01/2000							
ACFREIMB_S 01/01/2000							
ADC50000 01/01/2000							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
<input type="radio"/> Non-Multiplier		18					
<input checked="" type="radio"/> Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type	None	22					
BIO Compounding Period							
BIO Interest		26					
BIO Max Period							
BIO Max Age							
BIO Max Age							
Add to Nursing Home Days							
Cov Instance Service							
Claim Max Exceeded							
Not counted in period							
Max							

STEPS		Formula		Begin Date		End Date	
3DAYHOSP 01/01/2000		ABC		2000			
ABC 01/10/2000		Standard Testing					
Primary		Section		Step		Section Step Seq	
PCT		Primary		Max		4	
PWHE							
EP							
MAX							
MAX							
TOT							
Standard							
ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000							
ACF60 01/01/2000							
ACF60_C 01/01/2000							
ACF60_S 01/01/2000							
ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000							
ACF7002 01/01/2000							
ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000							
ACF80 01/01/2000							
ACF80_C 01/01/2000							
ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000							
ACF80CUSTOM_C 01/01/2000							
ACF80CUSTOM_S 01/01/2000							
ACF80MN 01/01/2000							
ACF80MN_C 01/01/2000							
ACF80MN_S 01/01/2000							
ACFCA_C 01/01/2000							
ACFCA_S 01/01/2000							
ACFREIMB 01/01/2000							
ACFREIMB_C 01/01/2000							
ACFREIMB_S 01/01/2000							
ADC50000 01/01/2000							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
<input type="radio"/> Non-Multiplier		18					
<input checked="" type="radio"/> Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type	None	22					
BIO Compounding Period							
BIO Interest		26					
BIO Max Period							
BIO Max Age							
BIO Max Age							
Add to Nursing Home Days							
Cov Instance Service							
Claim Max Exceeded							
Not counted in period							
Max							

STEPS		Formula		Begin Date		End Date	
3DAYHOSP 01/01/2000		ABC		2000			
ABC 01/10/2000		Standard Testing					
Primary		Section		Step		Section Step Seq	
PCT		Primary		Max		4	
PWHE							
EP							
MAX							
MAX							
TOT							
Standard							
ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000							
ACF60 01/01/2000							
ACF60_C 01/01/2000							
ACF60_S 01/01/2000							
ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000							
ACF7002 01/01/2000							
ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000							
ACF80 01/01/2000							
ACF80_C 01/01/2000							
ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000							
ACF80CUSTOM_C 01/01/2000							
ACF80CUSTOM_S 01/01/2000							
ACF80MN 01/01/2000							
ACF80MN_C 01/01/2000							
ACF80MN_S 01/01/2000							
ACFCA_C 01/01/2000							
ACFCA_S 01/01/2000							
ACFREIMB 01/01/2000							
ACFREIMB_C 01/01/2000							
ACFREIMB_S 01/01/2000							
ADC50000 01/01/2000							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
<input type="radio"/> Non-Multiplier		18					
<input checked="" type="radio"/> Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type	None	22					
BIO Compounding Period							
BIO Interest		26					
BIO Max Period							
BIO Max Age							
BIO Max Age							
Add to Nursing Home Days							
Cov Instance Service							
Claim Max Exceeded							
Not counted in period							
Max							

STEPS		Formula		Begin Date		End Date	
3DAYHOSP 01/01/2000		ABC		2000			
ABC 01/10/2000		Standard Testing					
Primary		Section		Step		Section Step Seq	
PCT		Primary		Max		4	
PWHE							
EP							
MAX							
MAX							
TOT							
Standard							
ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000							
ACF60 01/01/2000							
ACF60_C 01/01/2000							
ACF60_S 01/01/2000							
ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000							
ACF7002 01/01/2000							
ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000							
ACF80 01/01/2000							
ACF80_C 01/01/2000							
ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000							
ACF80CUSTOM_C 01/01/2000							
ACF80CUSTOM_S 01/01/2000							
ACF80MN 01/01/2000							
ACF80MN_C 01/01/2000							
ACF80MN_S 01/01/2000							
ACFCA_C 01/01/2000							
ACFCA_S 01/01/2000							
ACFREIMB 01/01/2000							
ACFREIMB_C 01/01/2000							
ACFREIMB_S 01/01/2000							
ADC50000 01/01/2000							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
<input type="radio"/> Non-Multiplier		18					
<input checked="" type="radio"/> Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type	None	22					
BIO Compounding Period							
BIO Interest		26					
BIO Max Period							
BIO Max Age							
BIO Max Age							
Add to Nursing Home Days							
Cov Instance Service							
Claim Max Exceeded							
Not counted in period							
Max							

STEPS		Formula		Begin Date		End Date	
3DAYHOSP 01/01/2000		ABC		2000			
ABC 01/10/2000		Standard Testing					
Primary		Section		Step		Section Step Seq	
PCT		Primary		Max		4	
PWHE							
EP							
MAX							
MAX							
TOT							
Standard							
ACF50CA_C 01/01/2000							
ACF50CA_S 01/01/2000							
ACF60 01/01/2000							
ACF60_C 01/01/2000							
ACF60_S 01/01/2000							
ACF60CA 01/01/2000							
ACF60CA_C 01/01/2000							
ACF60CA_S 01/01/2000							
ACF7002 01/01/2000							
ACF7002_C 01/01/2000							
ACF7002_S 01/01/2000							
ACF80 01/01/2000							
ACF80_C 01/01/2000							
ACF80_S 01/01/2000							
ACF80CUSTOM 01/01/2000							
ACF80CUSTOM_C 01/01/2000							
ACF80CUSTOM_S 01/01/2000							
ACF80MN 01/01/2000							
ACF80MN_C 01/01/2000							
ACF80MN_S 01/01/2000							
ACFCA_C 01/01/2000							
ACFCA_S 01/01/2000							
ACFREIMB 01/01/2000							
ACFREIMB_C 01/01/2000							
ACFREIMB_S 01/01/2000							
ADC50000 01/01/2000							

MAXIMUM CALCULATION		Unit		Days		Per	
Type	Coverage	12	Unit	Days	14	Per	16
LIMIT							
<input type="radio"/> Non-Multiplier		18					
<input checked="" type="radio"/> Multiplier							
COVERAGE.ORIGINAL_BENEFIT_AMT							
COVERAGE.MAX_D							
BIO Type	None	22					
BIO Compounding Period					</		

10

Plan Load

STEPS

ABC 01/10/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

MAXIMUM CALCULATION

11

Type

Coverage

12

Unit

Dollars

14

Per

Service

16

LIMIT

Non-Multiplier

18

Multiplier

20

COVERAGE.ORIGINAL_BENEFIT_AMT

COVERAGE.PRIMARY_SPOUSE

COVERAGE.RISK_COMMENCED_DATE

ELIGIBILITY.COG_IMPAIRMENT_IND

ELIGIBILITY.COG_TEST_SCORE

ELIGIBILITY.COMPLEX_MED_CONDITION_IN

ELIGIBILITY.FUNCTION_INCAPACITY_IND

ELIGIBILITY.MED_NECESSITY_IND

COVERAGE.MAX_DAYS_PAYABLE

BIO On Remaining Balance

Add To Nursing Home Days

Claim Max Exceeded

Not counted in period

Max

24

28

30

Save

Close

FIG. 10

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

MAXIMUM CALCULATION

11

Type

Coverage

12

Unit

Dollars

14

Per

Service

16

LIMIT

☐ Non-Multiplier

☒ Multiplier

18

COVERAGE.ORIGINAL_BENEFIT_AMT

19

*

20

COVERAGE.MAX_DAYS_PAYABLE

21

BIO Type

Compound

22

None

Simple

Compound

BIO Compounding Period

24

BIO On Remaining Balance

☐

BIO Interest

26

BIO Max Period

28

Add To Nursing Home Days

☐

BIO Max Age

30

Claim Max Exceeded

☐

Not counted in period

Max

☐

Save

Close

FIG. 11

10

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

MAXIMUM CALCULATION

Type

Coverage

Unit

Dollars

Per

Service

LIMIT

Non-Multiplier

Multiplier

COVERAGE.ORIGINAL_BENEFIT_AMT

COVERAGE.MAX_DAYS_PAYABLE

BIO Type

Compound

BIO Compounding Period

BIO Interest

5%

BIO Max Period

28

BIO Max Age

30

BIO On Remaining Balance

Add To Nursing Home Days

Claim Max Exceeded

Not counted in period

Max

Save

Close

FIG. 12

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula Begin Date End Date

Description

STEP

Section Step Section Step Seq

MAXIMUM CALCULATION

Type Unit Per

LIMIT

☒ Non-Multiplier ☐ Multiplier

BIO Type BIO Compounding Period

BIO Interest

BIO Max Age

BIO Max Period

BIO On Remaining Balance ☐

Add To Nursing Home Days ☐

Claim Max Exceeded ☐

Not counted in period Max ☐

Save

Close

FIG. 13

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula Begin Date End Date

Description

-STEP-

Section Step Section Step Seq

ELIMINATION PERIOD

Type Per Claim Accumulates Toward

Limit ☐ Multiplier

☐ Benefit

Satisfaction Period

☐ Simple

☐ Calculation

*

Count Other Coverage EP Counted For Days

Save

Close

FIG. 14

40

Plan Load

STEPS

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Plans

Formulas

Steps

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

ELIMINATION PERIOD

Type

Coverage

Per

Claim

Accumulates Toward

44

Limit

Non-Multiplier

47

COVERAGE.ELIM_PERIOD

46

Satisfaction Period

Simple

48

Calculation

Coverage.Elim_Period

*

Claim_Cov.Hospital_Days

Count

Cnt Here/Apply Here

Other Coverage EP Counted For Days

0

Save

Close

FIG. 15

Plan Load

Plans

Formulas

Steps

STEPS

- ☒ 3DAYHOSP 01/01/2000
- ☒ ABC 01/10/2000
- ☒ Primary
- ☒ PCT
- ☒ PWHEN
- ☒ EP
- ☒ MAX
- ☒ MAX
- ☒ MAX
- ☒ TOT
- ☒ Standard
- ☒ ACF50CA_C 01/01/2000
- ☒ ACF50CA_S 01/01/2000
- ☒ ACF60 01/01/2000
- ☒ ACF60_C 01/01/2000
- ☒ ACF60_S 01/01/2000
- ☒ ACF60CA 01/01/2000
- ☒ ACF60CA_C 01/01/2000
- ☒ ACF60CA_S 01/01/2000
- ☒ ACF7002 01/01/2000
- ☒ ACF7002_C 01/01/2000
- ☒ ACF7002_S 01/01/2000
- ☒ ACF80 01/01/2000
- ☒ ACF80_C 01/01/2000
- ☒ ACF80_S 01/01/2000
- ☒ ACF80CUSTOM 01/01/2000
- ☒ ACF80CUSTOM_C 01/01/2000
- ☒ ACF80CUSTOM_S 01/01/2000
- ☒ ACF80MN 01/01/2000
- ☒ ACF80MN_C 01/01/2000
- ☒ ACF80MN_S 01/01/2000
- ☒ ACFCA_C 01/01/2000
- ☒ ACFCA_S 01/01/2000
- ☒ ACFREIMB 01/01/2000
- ☒ ACFREIMB_C 01/01/2000
- ☒ ACFREIMB_S 01/01/2000
- ☒ ADC50000 01/01/2000

Formula Begin Date End Date

Description

STEP

Section Step Section Step Seq

ELIMINATION PERIOD 41

Type 42 Per 44 Accumulates Toward

Limit

☐ Non-Multiplier 47 ☒ Multiplier

46

Satisfaction Period 48

☐ Simple 49

49

Count Other Coverage EP Counted For Days

CLAIM.BINDER_IND

CLAIM.CAUSE_OF_LOSS_CODE

CLAIM.CLAIM_MAX_EXCEEDED_IND

CLAIM.DATE_OF_LOSS

CLAIM.MEDICAID_IND

CLAIM.MEDICARE_IND

CLAIM.NH_DAYS

FIG. 16

40

Plan Load

STEPS

ABC 01/10/2000

Primary

PCT

PWHEH

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

ELIMINATION PERIOD

Type

Coverage

Per

Claim

Accumulates Toward

Limit

Non-Multiplier

COVERAGE.ELIM_PERIOD

Multiplier

Satisfaction Period

Simple

Coverage.Elim_Period

Calculation

Claim_Cov.Hospital_Days

Count

Other Coverage EP Counted For Days

0

Save

Close

FIG. 17

40

<div> <div> <div> <div>STEPS</div> <div> <div>3DAYHOSP 01/01/2000</div> <div>ABC 01/10/2000</div> <div>Primary</div> <div>PCT</div> <div>PWHEN</div> <div>EP</div> <div>MAX</div> <div>MAX</div> <div>MAX</div> <div>TOT</div> <div>Standard</div> <div>PCT</div> </div> </div> <div> <div>ACF50CA_C 01/01/2000</div> <div>ACF50CA_S 01/01/2000</div> <div>ACF60 01/01/2000</div> <div>ACF60_C 01/01/2000</div> <div>ACF60_S 01/01/2000</div> <div>ACF60CA 01/01/2000</div> <div>ACF60CA_C 01/01/2000</div> <div>ACF60CA_S 01/01/2000</div> <div>ACF7002 01/01/2000</div> <div>ACF7002_C 01/01/2000</div> <div>ACF7002_S 01/01/2000</div> <div>ACF80 01/01/2000</div> <div>ACF80_C 01/01/2000</div> <div>ACF80_S 01/01/2000</div> <div>ACF80CUSTOM 01/01/2000</div> <div>ACF80CUSTOM_C 01/01/2000</div> <div>ACF80CUSTOM_S 01/01/2000</div> <div>ACF80MN 01/01/2000</div> <div>ACF80MN_C 01/01/2000</div> <div>ACF80MN_S 01/01/2000</div> <div>ACFCA_C 01/01/2000</div> <div>ACFCA_S 01/01/2000</div> <div>ACFREIMB 01/01/2000</div> <div>ACFREIMB_C 01/01/2000</div> <div>ACFREIMB_S 01/01/2000</div> </div> </div> </div>		<div> <div> <div>Formula</div> <div>ABC</div> </div> <div> <div>Begin Date</div> <div>2000</div> </div> <div> <div>End Date</div> <div></div> </div> </div>	
<div> <div>Description</div> <div>Standard Testing</div> </div>		<div> <div>STEP</div> <div>Section</div> <div>Primary</div> <div>Step</div> <div>Max</div> <div>Section Step Seq</div> <div>4</div> </div>	
<div> <div>ELIMINATION PERIOD</div> <div> <div>Type</div> <div>Coverage</div> </div> <div> <div>Limit</div> <div> <div>Non-Multiplier</div> <div> <div>Coverage.ELIM_PERIOD</div> </div> </div> </div> <div> <div>Per Claim</div> <div>41</div> </div> <div> <div>Accumulates Toward</div> <div>44</div> </div> </div>		<div> <div>Count</div> <div>Cnt Here/Apply Here</div> </div>	
<div> <div>Satisfaction Period</div> <div> <div>Simple</div> <div> <div>20</div> <div>Days</div> </div> </div> </div>		<div> <div>Other Coverage EP Counted For Days</div> <div>0</div> </div>	
<div> <div>Save</div> </div>		<div> <div>Close</div> </div>	

FIG. 18

40

Plan Load		STEPS		Formulas		Steps	
ABC		3DAYHOSP 01/01/2000		ACF50CA_C 01/01/2000		ACF50CA_S 01/01/2000	
ABC 01/10/2000		ABC 01/10/2000		ACF60_C 01/01/2000		ACF60_S 01/01/2000	
Primary		Primary		ACF60CA 01/01/2000		ACF60CA_C 01/01/2000	
PCT		PCT		ACF60CA_S 01/01/2000		ACF7002 01/01/2000	
PWHEEN		PWHEEN		ACF7002_C 01/01/2000		ACF7002_S 01/01/2000	
EP		EP		ACF80 01/01/2000		ACF80_C 01/01/2000	
MAX		MAX		ACF80_S 01/01/2000		ACF80CUSTOM 01/01/2000	
MAX		MAX		ACF80CUSTOM_C 01/01/2000		ACF80CUSTOM_S 01/01/2000	
TOT		TOT		ACF80MN 01/01/2000		ACF80MN_C 01/01/2000	
				ACF80MN_S 01/01/2000		ACFCA_C 01/01/2000	
				ACFCA_S 01/01/2000		ACFREIMB 01/01/2000	
				ACFREIMB_C 01/01/2000		ACFREIMB_S 01/01/2000	
				ADC50000 01/01/2000			

Formula		Begin Date		End Date	
ABC		2000			

Description: Standard Testing

STEP		Section		Step		Section Step Seq	
Primary		Max		4			

ELIMINATION PERIOD		Per Claim		Accumulates Toward	
Type	Coverage	41		44	
Limit					
<input checked="" type="radio"/> Non-Multiplier	<input type="radio"/> Multiplier				
COVERAGE.ELIM_PERIOD					

Satisfaction Period		Calculation	
<input type="radio"/> Simple	<input checked="" type="radio"/> Calculation		
Coverage.Elim_Period		48	

Count		Other Coverage EP Counted For Days	
49		0	

Cnt Here/Apply Here		Cnt Here/Apply Elsewhere	

Save		Close	

FIG. 19

40

Plan Load

STEPS

ABC 01/10/2000

Primary

PCT

PWHEH

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

ELIMINATION PERIOD

Type

Benefit

Per

Cov Instance

41

Accumulates Toward

44

Limit

NONE

ACF

ACFCA

AD

ADC

ADCB

ALCF

Non-Multiplier

Multipler

COVERAGE.ELIM_PERIOD

47

Satisfaction Period

Simple

Calculation

Coverage.Elim_Period

48

Claim_Cov.Hospital_Days

Count

Other Coverage EP Counted For Days

0

49

Save

Close

FIG. 20

STEPS		Formula		Begin Date		End Date	
<div> <div>Plan Load</div> <div>Plans</div> <div>Formulas</div> <div>Steps</div> </div>		<div> <div>ABC</div> <div>Standard Testing</div> </div>		<div> <div>2000</div> <div>2000</div> </div>		<div> <div>2000</div> <div>2000</div> </div>	
<div> <div>Primary</div> <div>PCT</div> <div>PWHEEN</div> <div>EP</div> <div>MAX</div> <div>MAX</div> <div>TOT</div> <div>Standard</div> <div>L PCT</div> <div>ACF50CA_C 01/01/2000</div> <div>ACF50CA_S 01/01/2000</div> <div>ACF60 01/01/2000</div> <div>ACF60_C 01/01/2000</div> <div>ACF60_S 01/01/2000</div> <div>ACF60CA 01/01/2000</div> <div>ACF60CA_C 01/01/2000</div> <div>ACF60CA_S 01/01/2000</div> <div>ACF7002 01/01/2000</div> <div>ACF7002_C 01/01/2000</div> <div>ACF7002_S 01/01/2000</div> <div>ACF80 01/01/2000</div> <div>ACF80_C 01/01/2000</div> <div>ACF80_S 01/01/2000</div> <div>ACF80CUSTOM 01/01/2000</div> <div>ACF80CUSTOM_C 01/01/2000</div> <div>ACF80CUSTOM_S 01/01/2000</div> <div>ACF80MN 01/01/2000</div> <div>ACF80MN_C 01/01/2000</div> <div>ACF80MN_S 01/01/2000</div> <div>ACFCA_C 01/01/2000</div> <div>ACFCA_S 01/01/2000</div> <div>ACFREIMB 01/01/2000</div> <div>ACFREIMB_C 01/01/2000</div> <div>ACFREIMB_S 01/01/2000</div> </div>		<div> <div>Section</div> <div>Primary</div> <div>Step</div> <div>Max</div> <div>Section Step Seq</div> <div>4</div> </div>		<div> <div>ELIMINATION PERIOD</div> <div>Type</div> <div>Coverage</div> <div>Per</div> <div>Claim</div> <div>Accumulates Toward</div> <div>Limit</div> <div>Non-Multiplier</div> <div>Multi-Multiplier</div> <div>Coverage.ELIM_PERIOD</div> <div>Satisfaction Period</div> <div>Simple</div> <div>Days</div> <div>Calculation</div> <div>Count</div> <div>Cnt Here/Apply Here</div> <div>Other Coverage EP Counted For Days</div> <div>0</div> </div>			

Save

Close

FIG. 21

Plan Load

Plans

Formulas

Steps

STEPS

ABC 01/10/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ADC50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

Max

Section Step Seq

4

PERCENT

Percent To Pay

50

Save

Close

FIG. 22

PCT	100		
EP	Type: Coverage	Per: Claim	
	Limit: Coverage.Elim_Period (Non Multiplier)		
	Satisfaction Period: 3 Times (Simple)		
	Count: Count Here/Apply Here		
MAX	Type: Coverage	Per: Week	Units: Dollars
	Limit: 7 * Coverage.Original_Benefit_Amt (calculated)		
	BIO Type: Compound	BIO Interest: 5%	BIO Max Period: 20
	BIO Compounding Period: Annually		BIO Max Age: 85
MAX	Type: Coverage	Per: Lifetime	Units: Dollars
	Limit: Coverage.Original_Benefit_Amt * Coverage.Max_Days_Payable		
	BIO Type: Compound	BIO Interest: 5%	BIO Max Period: 20
	BIO Compounding Period: Annually		BIO Max Age: 85

FIG. 23

"INSURANCE INFORMATION MANAGEMENT SYSTEM AND METHOD"
Applicant: David HANSON et al.
Continuation of USAN 10/279,863
Attorney Docket No.: 52493.000343

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEH

EP

MAX

MAX

TOT

PWHEH

PWHEH

EP

TOT

EP

MAX

PCT

PWHEH

PWHEH

EP

TOT

Own

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

Formula ABC Begin Date 2000 End Date

Description Standard Testing

STEP

Section Primary Step TOT Section Step Seq 4

TOTAL

Non-Multiplier

Indemnity Amount

BIO Type

Per

7

72

73

74

Multiplier

COVERAGE.ORIGINAL_BENEF

BIO Interest

BIO Compounding Period

20

75

76

BIO Max Period

BIO Max Age

77




78

Save

Close

FIG. 24

"INSURANCE INFORMATION MANAGEMENT SYSTEM AND METHOD"
Applicant: David HANSON et al.
Continuation of USAN 10/279,863
Attorney Docket No.: 52493.000343

Plan Load	STEPS	Formula	Begin Date	End Date
 Plans	 Formulas	ABC	2000	
 Steps	<div>ABC 01/10/2000 PCT PWEN EP MAX MAX MAX TOT PWEN PWEN EP TOT EP PCT PWEN PWEN EP TOT Own ACF50CA_C 01/01/2000 ACF50CA_S 01/01/2000 ACF60 01/01/2000 ACF60_C 01/01/2000 ACF60_S 01/01/2000 ACF60CA 01/01/2000 ACF60CA_C 01/01/2000 ACF60CA_S 01/01/2000 ACF7002 01/01/2000 ACF7002_C 01/01/2000 ACF7002_S 01/01/2000 ACF80 01/01/2000 ACF80_C 01/01/2000 ACF80_S 01/01/2000 ACF80CUSTOM 01/01/2000</div>	Standard Testing		

STEP

Section Primary

Step TOT

Section Step Seq 4

TOTAL

☐ Non-Multiplier

☒ Multiplier

Indemnity Amount

7

72

BIO Type

Compound

73

Per

Day

74

BIO Interest

5

75

BIO Compounding Period

Annually

76

BIO Max Period

20

77

BIO Max Age

85

78

COVERAGE.ORIGINAL_BENEF

20

Annually

Every Other Year

Semi-Annually

Quarterly

Monthly

Save

Close

FIG. 25

FIG. 26

TOT	Indemnity Amt: Coverage.Original_Benefit_Amt	Per: Day
	BIO Type: Compound	BIO PCT: 5% BIO Max Period: 20
	BIO Compounding Period: 12 Months	BIO Max Age: 85
PCT	100	
EP	Type: Coverage	Per: Claim
	Limit: Coverage.Elim_Period (Non Multiplier)	
	Satisfaction Period: 3 Times (Simple)	
	Count: Count Here/Apply Here	
MAX	Type: Coverage	Per: Lifetime
	Limit: Coverage.Original_Benefit_Amt * Coverage.Max_Days_Payable	Units: Dollars
	BIO Type: Compound	BIO Interest: 5% BIO Max Period: 20
	BIO Compounding Period: Annually	BIO Max Age: 85

FIG. 27

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula

ABC

Begin Date

2000

End Date

Description

Standard Testing

STEP

Section

Primary

Step

PWHEN

Section Step Seq

9

PERFORM WHEN

Section

82

Condition

Primary

Standard

Privileged

A

B

SOL

Default Condition

Save

Close

FIG. 28

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step PWHEN

Section Step Seq 9

PERFORM WHEN

Section

Condition

SOL

Default Condition

True

Save

Close

FIG. 29

"INSURANCE INFORMATION MANAGEMENT SYSTEM AND METHOD"

Applicant: David HANSON et al.
Continuation of USAN 10/279,863
Attorney Docket No.: 52493.000343

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula Begin Date End Date

Description

STEP

Section Step Section Step Seq

PERFORM WHEN

Section

☒ Condition

☐ SOL

Default Condition

TRUE

FALSE

Save

Close

FIG. 30

Plan Load

Plans

Formulas

Steps

STEPS

3DAYHOSP 01/01/2000

ABC 01/10/2000

Primary

PCT

PWHEN

EP

MAX

MAX

TOT

Standard

ACF50CA_C 01/01/2000

ACF50CA_S 01/01/2000

ACF60 01/01/2000

ACF60_C 01/01/2000

ACF60_S 01/01/2000

ACF60CA 01/01/2000

ACF60CA_C 01/01/2000

ACF60CA_S 01/01/2000

ACF7002 01/01/2000

ACF7002_C 01/01/2000

ACF7002_S 01/01/2000

ACF80 01/01/2000

ACF80_C 01/01/2000

ACF80_S 01/01/2000

ACF80CUSTOM 01/01/2000

ACF80CUSTOM_C 01/01/2000

ACF80CUSTOM_S 01/01/2000

ACF80MN 01/01/2000

ACF80MN_C 01/01/2000

ACF80MN_S 01/01/2000

ACFCA_C 01/01/2000

ACFCA_S 01/01/2000

ACFREIMB 01/01/2000

ACFREIMB_C 01/01/2000

ACFREIMB_S 01/01/2000

ACF50000 01/01/2000

Formula ABC

Begin Date 2000

End Date

Description Standard Testing

STEP

Section Primary

Step PWHEN

Section Step Seq 2

PERFORM WHEN

Section Primary

Condition

SOL

Select....

Default Condition

Save

Close

FIG. 31

Perform/When	Section: Privileged Condition: POC.Priv_Care_Ind = True
Perform/When	Section: Own Condition: POC.Priv_Care_Ind = False

- The rest of this Benefit formula is just like doing two formulas:
 - » One for Privileged Plan of Care and
 - » One for Own Plan of Care

FIG. 32

Section Privileged:

PCT 100

EP Type: Coverage Per: Claim
Limit: Coverage.Elim_Period (Non Multiplier)
Satisfaction Period: 3 Times (Simple)
Count: Count Here/Apply Elsewhere

MAX Type: Coverage Per: Week Units: Dollars
Limit: $7 * \text{Coverage.Original_Benefit_Amt (calculated)}$
BIO Type: Compound BIO Interest: 5% BIO Max Period: 20
BIO Compounding Period: Annually BIO Max Age: 85

MAX Type: Coverage Per: Lifetime Units: Dollars
Limit: $\text{Coverage.Original_Benefit_Amt} * \text{Coverage.Max_Days_Payable}$
BIO Type: Compound BIO Interest: 5% BIO Max Period: 20
BIO Compounding Period: Annually BIO Max Age: 85

FIG. 33

Section Own:			
PCT	80		
EP	Type: Coverage	Per: Claim	
	Limit: Coverage.Elim_Period (Non Multiplier)		
	Satisfaction Period: 3 Times (Simple)		
	Count: Count Here/Apply Here		
MAX	Type: Coverage	Per: Day	Units: Dollars
	Limit: Coverage.Original_Benefit_Amt		
	BIO Type: Compound	BIO Interest: 5%	BIO Max Period: 20
	BIO Compounding Period: Annually		BIO Max Age: 85
MAX	Type: Coverage	Per: Lifetime	Units: Dollars
	Limit: Coverage.Original_Benefit_Amt * Coverage.Max_Days_Payable		
	BIO Type: Compound	BIO Interest: 5%	BIO Max Period: 20
	BIO Compounding Period: Annually		BIO Max Age: 85

FIG. 34